

Raffle Application

1040 2nd Street, Ste 103, Sturgis, SD 57785
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I Agree

- ☐ No person shall be compensated in connection with Lottery in excess of \$60 or minimum wage. (SDCL 22-25-25 (4))
☐ No separate organization or professional person is employed to conduct the lottery or assist with it. (SDCL 22-25-25 (3))

ORGANIZATION CONDUCTING RAFFLE

Name:	Phone Number:		
Mailing Address:	City:	State:	Zip:

PROFIT INFORMATION

Unit Price of Tickets to be Sold: _____ Projected Revenue: _____
Describe where and how the funds created, as a result of this raffle, will be used: _____

State how raffle is direct benefit to Sturgis Community & organization affiliated (select one) (see checklist #6):

- ☐ This raffle will provide a direct benefit to the Sturgis Community (Ex. space rental, donation to city, Sturgis chapter).
Explanation _____

☐ This raffle will not provide a direct benefit to the Sturgis Community. Explanation: _____

	DRAWING INFORMATION (must be within 15 days of end of sales)	PRIZES & VALUES
Start Date:	Date:	
End Date:	Time:	
Location:	Location:	

INCLUDE

- ☐ Fee: \$5.00 – Prize(s) value less than \$2000.00.
\$100.00 – Prize(s) value more than \$2000.00. (\$75 returned when 'After Raffle Report' complete)
☐ Current Statement from State of SD showing non-profit organization (SDCL 22-25-25 (1)). Can be obtained at <http://apps.sd.gov/applications/st32cprs/soscorplookup.aspx>.
☐ Value of Prizes (SDCL 22-25-25 (5A))
☐ 30 days notice before start of raffle (SDCL 22-25-256)). BEGINS WHEN APPLICATION COMPLETE WITH FINANCE OFFICE.

City Ordinance 25.02.15: AFTER LOTTERY REPORT TO FINANCE OFFICER

Any organization conducting a lottery under this Title shall furnish the City Finance Officer, within twenty (20) days after the termination of said lottery, a written report stating the total number of tickets sold, the price per ticket sold, the location of the drawing, a statement of the value of each prize awarded from that lottery, a statement of the name and address of the winner of each prize awarded and a statement of the amount of direct benefit to a local affiliate charity or non-profit, if any. Upon receipt of a complete After Lottery Report, any applicant that paid an application fee of \$100.00 shall have \$75.00 of the application fee returned to it.

Contact Information

Person In Charge (print):		Title:
Email Address:	Phone Number:	
Signature:	Date:	
Office Use- Approval: <input type="checkbox"/> Y <input type="checkbox"/> N	Signature:	Date:

"This institution is an equal opportunity provider and employer."

